

<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Application Number</b>		10/623,039	
	<b>Filing Date</b>		July 18, 2003	
	<b>First Named Inventor</b>		Subhashis Banerjee	
	<b>Title</b>	Treatment of psoriatic arthritis using human TNFa antibodies		
	<b>Art Unit</b>	1643		
	<b>Examiner Name</b>	David J. Blandchard		
<b>Attorney Docket No.</b>		117813-18801		

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.  
**OR**  
☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:
 

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**OR**  
☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

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**OR**

☐ Firm or Individual Name

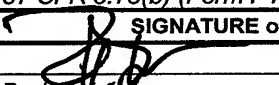
Address

City	State	Zip	
Country	Telephone	Email	

I am the:

☐ Applicant/Inventor.  
**OR**  
☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	8/12/09
Name	Paul D. Vasser	Telephone	
Title and Company	Assistant Secretary		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.